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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Demirekler

Application No.: 09/977,005

Filed: 10/12/2001

Title: Apparatus and Method for Echo Cancellation

Attorney Docket No.: 14573MDUS01U 120-251

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Group Art Unit: 2643

Examiner: Harold

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RESPONSE UNDER 37 CFR 1.111

Dear Sir:

In response to the Office Action of October 8, 2003, please amend the claims to this application as shown on the attached sheets.

REMARKS

Reconsideration and further examination is respectfully requested. Claims 1-17 were pending in this application. Claims 18-31 have been added by this amendment. Claims 1-31 are now pending.

Rejections under 35 U.S.C. §102

Claims 1, 9 and 17 have been rejected under 35 U.S.C. §102 as being anticipated by Younce et al (United States Patent 6,240,180).

01/22/2004 BDAVENPO 00000001 502569 09977005

01 FC:1202 Younce: DA
02 FC:1201 344.00 DA

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Serial No: 09/977,005
Attorney Docket No.: 14573MDUS01U 120-251


JAN 08 2004

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CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. 1.8

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January 8, 2004
date



Signature

Lindsay G. McGuinness, Reg. No. 38,549
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Amendment 10 pages
Transmittal x 2 2 pages
Change of Correspondence Address 1 page
Fee Sheet x 2 2 pages
Total including this sheet 16 pages

PTO/SB/17- (10-02)

Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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<h1 style="text-align: center;">FEE TRANSMITTAL</h1> <h2 style="text-align: center;">for FY 2003</h2> <p style="text-align: center;"><small>Patent fees are subject to annual revision.</small></p>		Complete if Known	
		Application Number	09/977,005
		Filing Date	10/12/2001
		First Named Inventor	Demirekler
		Examiner Name	Harold
		Art Unit	2643
		Attorney Docket No.	14573MDUS01U 120-251
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT		(\$542.00)	

METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 502569 Deposit Account Name: Staubing McGuinness & Manaras LLP The Commissioner is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		FEE CALCULATION (continued) 3. ADDITIONAL FEES <table border="1"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>1051</td> <td>130</td> <td>2051</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>1052</td> <td>50</td> <td>2052</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>1053</td> <td>130</td> <td>1053</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>1812</td> <td>2,520</td> <td>1812</td> <td>2,520</td> <td>For filing a request for <i>ex parte</i> reexamination</td> <td></td> </tr> <tr> <td>1804</td> <td>920*</td> <td>1804</td> <td>920*</td> <td>Requesting publication of SIR prior to Examiner action</td> <td></td> </tr> <tr> <td>1805</td> <td>1,840*</td> <td>1805</td> <td>1,840*</td> <td>Requesting publication of SIR after Examiner action</td> <td></td> </tr> <tr> <td>1251</td> <td>110</td> <td>2251</td> <td>55</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>1252</td> <td>410</td> <td>2252</td> <td>205</td> <td>Extension for reply within second month, minus 1st month already paid</td> <td></td> </tr> <tr> <td>1253</td> <td>940</td> <td>2253</td> <td>470</td> <td>Extension for reply within third month</td> <td></td> </tr> <tr> <td>1254</td> <td>1,470</td> <td>2254</td> <td>735</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>1255</td> <td>2,000</td> <td>2255</td> <td>1,000</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>1401</td> <td>320</td> <td>2401</td> <td>165</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>1402</td> <td>320</td> <td>2402</td> <td>165</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1403</td> <td>290</td> <td>2403</td> <td>145</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>1451</td> <td>1,510</td> <td>1451</td> <td>1,510</td> <td>Petition to institute a public use proceeding</td> <td></td> </tr> <tr> <td>1452</td> <td>110</td> <td>2452</td> <td>55</td> <td>Petition to revive - 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Lindsay G. McGuinness	Registration No. (Attorney/Agent)	38,549
Signature	<i>Lindsay G. McGuinness</i>	Telephone	978-264-6664
		Date	1/8/2004

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/977,005
	Filing Date	10/12/2001
	First Named Inventor	Demirekler
	Group Art Unit	2643
	Examiner Name	Harold
Total Number of Pages in This Submission	Attorney Docket Number 14573MDUS01U 120-251	

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) and letter <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks: Please charge any deficiency or credit any overpayment to Deposit Account No. 502569.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Lindsay G. McGuinness, Reg. No. 38,549 Steubing McGuinness & Manaras LLP
Signature	<i>Lindsay McGuinness</i>
Date	1/8/2004

CERTIFICATE OF MAILING OR FACSIMILE			
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Type or printed name	<i>Lindsay McGuinness</i>		
Signature	<i>Lindsay McGuinness</i>	Date	January 8, 2004

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